COMBINED DECLAR APPLICATION WITH () Declaration submitted with initial () Declaration submitted after initial	I POWER	OF ATTORNEY		PB602 First Nam Ignatit BRITT	te if known:
				Group A	Art Unit:
As below named	d inventor. I here	by declare that:		<u>. </u>	
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.		
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
		A MEDICAMENT D	ISPENSER		
the specification of which	h (check only one	e item below):			
			or PCT International and was amended on (MM/DD/)	YYYY)	·
I hereby state that I have as amended by any amen	reviewed and undument specificall	y referred to above.	the above-identified specification o patentability as defined in 37 C		
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY P	any PCT internati d have also ident onal application h	ional application which of ified below, by checking naving a filing date before	designated at least one country of the box, any foreign application to that of the application on whice	ther than to n for paten	he United it or inventor's
Prior Foreign Application		Country	Foreign Filing Date	T	PRIORITY
Number (s)		110	(MM/DD/YYYY))		CLAIMED
1. 60/464,477 2.	<u> </u>	US	22 April 2003		X
3.	<u> </u>				
4.					
5.					
I hereby claim the benefit under T	itle 35, United St			cation(s) l	isted below:
Application No.		Filing Date	(MM/DD/YYYY)		
2.					

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER

PB60225

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

	,					
PRIOR	U.S. PARENT	APPLICATION or PCT PARENT A	PPLICATION			
				STATUS (Check of		
U.S.	Parent Application or Number	PCT Parent Parent Filing I (MM/DD/YY)		PENDING	ABANDONED	
prosecut Custome	e this application ar r Number 23347 ar	': As a named inventor, I hereby appoint the dot to transact all business in the Patent and Customer Number 20462	Trademark Office connected ther	rewith		
Address	s all corresponden	ice and telephone calls to Customer N	umber <u>23347</u>	Direct Telephone Cal	ls to:	
				919 4	rt Smith 83 9616	
belief a	re believed to be t made are punishal	tatements made herein of my own kno true; and further that these statements we ble by fine or imprisonment, or both, u the application or any patent issuing the	were made with the knowledge nder 18 U.S.C. 1001, and that	that willful false sta	tements and the	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	INITIAL	
2	OF INVENTOR	BRITTO	Ignatius	Loy		
	INVENTOR'S SIGNATURE	Ignature dy Butto		Date: 01 June 2		
0	RESIDENCE & CITIZENSHIP	Evreux	STATE OR FOREIGN COUNTRY FR	US COUNTRY OF CITIZENS		
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS GlaxoSmithKline	Research Triangle Park	North Carolina		
		Five Moore Drive, PO Box 13398				
2	FULL NAME OF INVENTOR	FAMILY NAME LAROCHE	FIRST GIVEN NAME Christophe	SECOND GIVEN NAME	INITIAL	
2	INVENTOR'S	Signature	Ciriotopiic	Date: CZ VI	2206	
	SIGNATURE		•	1 1		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENS	НЪР	

DECLARATION FOR "371" APPLICATION

COMBINED DECLAR	RATION FOR UTILITY O	R DESIGN PATENT	ATTORNEY'S DOCKET PB60225
APPLICATION WITH	I POWER OF ATTORNEY	Y	First Named Inventor:
			Ignatius Loy
			BRITTO
			2.0.10
() Declaration submitted with initial	filing or		Complete if known:
			App No.:
() Declaration submitted after initial	I filing (surcharge required 37CFR1.16(e))		
			Filing Date
			Group Art Unit:
			Group Art Offic.
As below named	d inventor. I hereby declare that:		
My residence, post office	e address and citizenship are as stated be	low next to my name.	
	ll, first and sole inventor (if only one nad I below) of the subject matter which is c		
	A MEDICAMENT	DISPENSER	
the specification of which	h (check only one item below):		
[]is attached hereto. OR			
[x] was filed on _ as U	nited States application Serial No.	or PCT International	·
	T/EP2004/004247 filed 20 April 2004 applicable)	and was amended on (MM/DD/Y	YYY)
I hereby state that I have as amended by any amen	reviewed and understand the contents o dment specifically referred to above.	f the above-identified specification	, including the claims,
I acknowledge the duty to	o disclose information which is material	to patentability as defined in 37 C	FR §1.56.
I hansha alaim Ganina minin t	St		
inventor's certificate or 365(a) of	nefits under 35 U.S.C. §119 (a)-(d) or §3 any PCT international application which	docimental of land applications(s	s) for patent or
States of America listed below an	d have also identified below, by checking	designated at least one country of	for patent or inventor's
certificate or of any PCT internation	onal application having a filing date before	ore that of the application on which	nriority is claimed
PRIOR FOREIGN AND ANY P	PRIORITY CLAIMS UNDER 35 U.S.	C. 119:	. priority is oranico.
Prior Foreign Application	Country	Foreign Filing Date	PRIORITY
Number (s)	•	(MM/DD/YYYY))	CLAIMED
1. 60/464,477	US	22 April 2003	X
2.			
3.			
4.			
5.			
I hereby claim the benefit under Ti	itle 35, United States Code §119(e) of a	ny United States provisional applic	ation(s) listed below:
Application No.	Filing Dat	e (MM/DD/YYYY)	
1.			
2. 3.			
J.			

DECLARATION FOR "371" APPLICATION

COMBINED DECLARATION FOR UTILITY or DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY Continued

ATTORNEY'S DOCKET NUMBER PB60225

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

		ate of this application:	+ DDY 10 + M10 1				
RIOR	U.S. PARENT	APPLICATION or PCT PARENT	APPLICATION	<u> </u>	CTATUS (Chaola		
					STATUS (Check		
U.S.	Parent Application or Number	PCT Parent Parent Filing (MM/DD/YY		PATENTED	PENDING	ABANDONED	
OWEI	R OF ATTORNEY	: As a named inventor, I hereby appoint t	the practitioners a	ssociated with the	Customer Numbers	provided below to	
osecut	e this application ar	nd to transact all business in the Patent and Customer Number 20462	d Trademark Offic	ce connected there	with		
ddean	all corresponder	ce and telephone calls to Customer N	Number 23347	'	Direct Telephone Ca	lls to:	
Address all correspondence and telephone calls to Customer Number 23347				Robert Smith 919 483 9616			
herehi	declare that all s	tatements made herein of my own kno	owledge are true	and that all stat	ements made on in	formation and	
ncico;	-a baliared to be	rue; and further that these statements	were made with	the knowledge	that willful false st	atements and the	
:iiei a	ie delieved to de i	the ter Construction with the State Health	word made with	and knowledge	mak willful false st	atamante mass	
ke so	made are punishal	ble by fine or imprisonment, or both, u	under 18 U.S.C.	1001, and that	such willful laise st	atements may	
opard	ize the validity of	the application or any patent issuing t	thereon.				
		FAMILY NAME	FIRST GIVEN NAM	· ·	SECOND GIVEN NAME	ANITIAL	
•	FULL NAME	BRITTO	Ignatius			Loy	
2	OF INVENTOR	Signature	Ignatius	I Ignatius		Date:	
	INVENTOR'S	Signature		Date:			
^	SIGNATURE	CITY	STATE OR FOREIG	N COUNTRY	COUNTRY OF CITIZEN	SHIP	
0	RESIDENCE & CITIZENSHIP	Evreux	FR		US		
		POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/CO	UNTRY	
1	POST OFFICE ADDRESS	GlaxoSmithKline	Research Triangle Park		North Carolina 27709, US		
1	ADDRESS		tangic raik	1101111 Curoniu	27707,00		
		Five Moore Drive, PO Box 13398	FIRST GIVEN NAM		SECOND GIVEN NAM	PANITIAL	
_	FULL NAME				SECOND GIVEN NAMEDINITIAL		
2	OF INVENTOR	LAROCHE Christophe Signature			Date:		
	INVENTOR'S	Signature			Date.		
	SIGNATURE	CITY	STATE OR FOREIG	EN COUNTRY	COUNTRY OF CITIZEN	SHIP	
0	RESIDENCE &	Evreux	FR	FR			
	CITIZENSHIP	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/COUNTRY		
2	POST OFFICE ADDRESS	GlaxoSmithKline	Research Tr	ionale Pork	North Carolina 27709, US		
2	ADDRESS	Five Moore Drive, PO Box 13398	icescaren xi	iangie i ai k	1 North Caronina	27703,00	
		FAMILY NAME	FIRST GIVEN NAM	4F	SECOND GIVEN NAME	MNITIAL	
2	FULL NAME	LO CLARK (80) 2 8-4-10-4	Verna	IL.	Charlene Lo	(DCL) 2 July	
	OF INVENTOR INVENTOR'S	Signature	VCIHA		Date Date		
	SIGNATURE	Suprature				2004	
^	RESIDENCE &	CITY	STATE OR FOREIG	GN COUNTRY	COUNTRY OF CITIZEN		
0	CITIZENSHIP	Durham	NC, US		US		
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/CO	UNTRY	
3	ADDRESS	GlaxoSmithKline	Research Tr	iangle Park	North Carolina	27709, US	
		Five Moore Drive, PO Box 13398		9		•	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAM	1E	SECOND GIVEN NAM	E/INITIAL	
2	OF INVENTOR	PEYRON	Isabelle		Denise		
4	INVENTOR'S	Signature	134DCHC		Date:		
	SIGNATURE						
0	RESIDENCE &	CITY	STATE OR FOREIG	ON COUNTRY	COUNTRY OF CITIZEN	ISHIP	
v	CITIZENSHIP	Evreux	FR		FR		
	POST OFFICE	POST OFFICE ADDRESS	CITY		STATE & ZIP CODE/CO	UNTRY	
4	ADDRESS	GlaxoSmithKline	Research Tr	iangle Park	North Carolina	27709, US	
•	I	l	1	•	1	•	

Five Moore Drive, PO Box 13398